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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/JP04/19373 12/24/2004

** FOREIGN APPLICATIONS *****

JAPAN 2003-427424 12/24/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
04/27/2007

** SMALL ENTITY **

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 4	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>						

ADDRESS

23373

TITLE

Agent or method for treating severe aphasia in cerebrovascular accident chronic stage

FILING FEE RECEIVED 550	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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